

**Please fill out completely and print clearly.
Missing or incomplete information may delay the
processing of your request.**

Periodical Title: _____

Article Author(s): _____

Article Title: _____

Volume: _____ Number: _____ Date: _____

Pages: _____ Will pay fee up to \$ _____

Today's date: _____ *Latest date required: _____

Your library card number: 2 1185

Name: _____

Address: _____

City: _____ Zip: _____

Phone numbers (*please indicate area codes*):
Day: _____ Evening: _____

Pickup location (*circle one*): Main CH CT DO MP TP

*** The library will try to meet deadlines, but this is not always possible due to reasons beyond our control.**

STAFF USE ONLY

Accepted by: _____ Date: _____ Paid

OCLC il number: _____

Search String: _____

Data requested: _____

ALA request Fax request Other: _____

Date requested: _____

Date received: _____ Lending Library: _____

Due date: _____

Renewal requested: _____ New Due date: _____

Date returned: _____

Charges: _____ Paid: _____

Notes: _____